

Mr. McDERMOTT. And left a mess and went on to Iraq, and now we have got two messes on our hands. The gentleman is absolutely right, what is happening in Afghanistan is a terrible mess.

Mr. DELAHUNT. To think that our military, as it has in Iraq, performed so professionally and admirably in Afghanistan, and now we are on the verge of seeing Afghanistan becoming a failed state.

Nicolas Kristoff, a columnist in the New York Times, says, and again it is this week, in the 2 years since the war in Afghanistan, opium production, and he has given us three choices, virtually been eliminated, declined 30 percent, soared 19-fold and become the major source of the world's heroin. That is what is happening in Afghanistan today.

In two provinces that are religiously conservative parts of Afghanistan, the number of children going to school has quintupled, has risen 40 percent, has plummeted as poor security has closed nearly all the schools there. The right answer is the last one.

This is truly potentially a disaster. President Karzai's brother, Ahmed Karzai, who represents the government in one of the southern provinces, was very blunt to an AP reporter this past Monday: it is like I am seeing the same movie twice, and no one is trying to fix the problem. What was promised to Afghans with the collapse of the Taliban was a new life of hope and change. Those are the words of President Bush, but what was delivered, nothing. There had been no significant changes for people. Karzai says he does not know what to say to people anymore.

We better pay attention to Afghanistan because with the focus now on Iraq, the media is taking the glare of the cameras away from a totally, potentially disastrous situation. They are scheduled to have elections in Afghanistan next June. It is estimated that the need would be for 70,000 police security forces. Does my colleague know how many have been trained? Does the gentleman know how many have been trained? Seven thousand, 7,000. This is, again, a potential foreign policy disaster, not just for this President but for this country.

With that, if the gentleman has anything further to say.

Mr. McDERMOTT. Mr. Speaker, I think we have said enough for tonight, but this issue will not go away.

One fact that I will finish with, this week now, more people have died in Iraq since the war began than died in the first 3 full years in Vietnam. So if we do not think we have got a developing mess on our hands, just remember how we eased into Vietnam, and this is where we are going if this administration does not begin to develop a plan.

Mr. DELAHUNT. Twenty-six people died today in Turkey, the victims of an act of terrorism. Some 400 were wounded. In the northern part of Iraq, not in

the so-called Sunni Triangle, 12 died as a result of acts of terrorism in northern Iraq.

We are in a mess. Let us get our act together. Let us support our President, but let us do it in consultation and make sure that America can continue to be proud and claim that it is great because it is good and it has a moral compass.

RECESS

The SPEAKER pro tempore (Mr. ROGERS of Alabama). Pursuant to clause 12(a) of rule I, the Chair declares the House in recess subject to the call of the Chair.

Accordingly (at midnight), the House stood in recess subject to the call of the Chair.

□ 0117

AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Mr. NUNES) at 1 o'clock and 17 minutes a.m.

CONFERENCE REPORT ON H.R. 1, MEDICARE PRESCRIPTION DRUG AND MODERNIZATION ACT OF 2003

Mr. THOMAS submitted the following conference report and statement on the bill (H.R. 1) to amend title XVIII of the Social Security Act to provide for a voluntary program for prescription drug coverage under the Medicare Program, to modernize the Medicare Program, to amend the Internal Revenue Code of 1986 to allow a deduction to individuals for amounts contributed to health savings security accounts and health savings accounts, to provide for the disposition of unused health benefits in cafeteria plans and flexible spending arrangements, and for other purposes:

CONFERENCE REPORT (H. REPT. 108-391)

The committee of conference on the disagreeing votes of the two Houses on the amendments of the Senate to the bill (H.R. 1), to amend title XVIII of the Social Security Act to provide for a voluntary program for prescription drug coverage under the Medicare Program, to modernize the Medicare Program, to amend the Internal Revenue Code of 1986 to allow a deduction to individuals for amounts contributed to health savings security accounts and health savings accounts, to provide for the disposition of unused health benefits in cafeteria plans and flexible spending arrangements, and for other purposes, having met, after full and free conference, have agreed to recommend and do recommend to their respective Houses as follows:

That the House recede from its disagreement to the amendment of the Senate to the text of the bill and agree to the same with an amendment as follows:

In lieu of the matter proposed to be inserted by the Senate amendment, insert the following.

SECTION 1. SHORT TITLE; AMENDMENTS TO SOCIAL SECURITY ACT; REFERENCES TO BIPA AND SECRETARY; TABLE OF CONTENTS.

(a) *SHORT TITLE*.—This Act may be cited as the “Medicare Prescription Drug, Improvement, and Modernization Act of 2003”.

(b) *AMENDMENTS TO SOCIAL SECURITY ACT*.—Except as otherwise specifically provided, whenever in division A of this Act an amendment is expressed in terms of an amendment to or repeal of a section or other provision, the reference shall be considered to be made to that section or other provision of the Social Security Act.

(c) *BIPA; SECRETARY*.—In this Act:

(1) *BIPA*.—The term “BIPA” means the Medicare, Medicaid, and SCHIP Benefits Improvement and Protection Act of 2000, as enacted into law by section 1(a)(6) of Public Law 106-554.

(2) *SECRETARY*.—The term “Secretary” means the Secretary of Health and Human Services.

(d) *TABLE OF CONTENTS*.—The table of contents of this Act is as follows:

Sec. 1. Short title; amendments to Social Security Act; references to BIPA and Secretary; table of contents.

TITLE I—MEDICARE PRESCRIPTION DRUG BENEFIT

Sec. 101. Medicare prescription drug benefit.

“PART D—VOLUNTARY PRESCRIPTION DRUG BENEFIT PROGRAM

“Subpart 1—Part D Eligible Individuals and Prescription Drug Benefits

“Sec. 1860D-1. Eligibility, enrollment, and information.

“Sec. 1860D-2. Prescription drug benefits.

“Sec. 1860D-3. Access to a choice of qualified prescription drug coverage.

“Sec. 1860D-4. Beneficiary protections for qualified prescription drug coverage.

“Subpart 2—Prescription Drug Plans; PDP Sponsors; Financing

“Sec. 1860D-11. PDP regions; submission of bids; plan approval.

“Sec. 1860D-12. Requirements for and contracts with prescription drug plan (PDP) sponsors.

“Sec. 1860D-13. Premiums; late enrollment penalty.

“Sec. 1860D-14. Premium and cost-sharing subsidies for low-income individuals.

“Sec. 1860D-15. Subsidies for part D eligible individuals for qualified prescription drug coverage.

“Sec. 1860D-16. Medicare Prescription Drug Account in the Federal Supplementary Medical Insurance Trust Fund.

“Subpart 3—Application to Medicare Advantage Program and Treatment of Employer-Sponsored Programs and Other Prescription Drug Plans

“Sec. 1860D-21. Application to Medicare Advantage program and related managed care programs.

“Sec. 1860D-22. Special rules for employer-sponsored programs.

“Sec. 1860D-23. State pharmaceutical assistance programs.

“Sec. 1860D-24. Coordination requirements for plans providing prescription drug coverage.

“Subpart 4—Medicare Prescription Drug Discount Card and Transitional Assistance Program

“Sec. 1860D-31. Medicare prescription drug discount card and transitional assistance program.

“Subpart 5—Definitions and Miscellaneous Provisions

“Sec. 1860D-41. Definitions; treatment of references to provisions in part C.